

1. CIR./DIST./ DIV. CODE <b>EDNY</b>	2. PERSON REPRESENTED <b>Clint Calero</b>	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER <b>15-780M</b>	4. DIST. DKT./DEF. NUMBER	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF (Case Name) <b>USA V. Calero et al</b>	8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <b>Appeal</b>	9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <b>Other</b>	10. REPRESENTATION TYPE (See Instructions) <b>CC</b>

11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) *If more than one offense, list (up to five) major offenses charged, according to severity of offense.*  
**18 USC 371**

12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS  <b>JAMES ROTH 299 BROADWAY SUITE 800 NEW YORK, NY 10007</b>  Telephone Number : <b>212-619-4240</b>	13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel  Prior Attorney's Appointment Dates: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel and because the interest of justice requires it, the Court appoints _____ whose name is _____ <input type="checkbox"/> C  <b>8/25/15</b> Date of Order <b>8/25/15</b> Nunc Pro Tunc Date Repayment or partial repayment ordered from the person represented for this service at time appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO
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14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions)

**CLAIM FOR SERVICES AND EXPENSES** **FOR COURT USE ONLY**

CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW
15. In a. Arraignment and/or Plea					
b. Bail and Detention Hearings					
c. Motion Hearings					
d. Trial					
e. Sentencing Hearings					
f. Revocation Hearings					
g. Appeals Court					
h. Other (Specify on additional sheets)					
(RATE PER HOUR = \$ ) TOTALS:					
16. Out of a. Interviews and Conferences					
b. Obtaining and reviewing records					
c. Legal research and brief writing					
d. Travel time					
e. Investigative and other work (Specify on additional sheets)					
(RATE PER HOUR = \$ ) TOTALS:					
17. Travel Expenses (lodging, parking, meals, mileage, etc.)					
18. Other Expenses (other than expert, transcripts, etc.)					

**GRAND TOTALS (CLAIMED AND ADJUSTED):**

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE TO: \_\_\_\_\_  
☐ Final Payment ☐ Interim Payment Number \_\_\_\_\_  
 20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION ☐ Supplemental Payment  
 21. CASE DISPOSITION  
 Have you previously applied to the court for compensation and/or reimbursement for this representation? ☐ YES ☐ NO If yes, were you paid? ☐ YES ☐ NO  
 Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? ☐ YES ☐ NO If yes, give details on additional sheets.  
 I swear or affirm the truth or correctness of the above statements. Date \_\_\_\_\_  
 Signature of Attorney \_\_\_\_\_

23. IN COURT COMP.			24. OUT OF COURT COMP.		25. TRAVEL EXPENSES		26. OTHER EXPENSES		27. TOTAL AMT. APPR./CERT.	
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER							DATE		28a. JUDGE/MAG. JUDGE CODE	
29. IN COURT COMP.			30. OUT OF COURT COMP.		31. TRAVEL EXPENSES		32. OTHER EXPENSES		33. TOTAL AMT. APPROVED	
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.							DATE		34a. JUDGE CODE	